



MARYLAND DEPARTMENT OF HEALTH
Medicaid Pharmacy Program

ADVISORY

No. 193

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Brand Kapvay® ER Removal from DAW 6 Program

The Maryland Medicaid Pharmacy Program (MMPP) wants to alert you that effective **Monday, January 28, 2019** brand Kapvay® ER tablets will no longer be preferred over its generic equivalent (clonidine HCl ER). Claims for clonidine HCl ER will be handled in the same manner as claims for other multisource medications*.

Please refer to our website for a complete list of preferred and non-preferred medications known as the Preferred Drug List (PDL) which can be found at the following link:

<https://mmcp.health.maryland.gov/pap/docs/Maryland%20PDL%201.1.19.pdf>

***Please note that prior to the effective date of this Advisory, any claim for clonidine ER will not require a Maryland Department of Health (MDH) Medwatch form, but will require a prior authorization override from Conduent's Call Center (1-800-932-3918).**

In an effort to give timely notice to the pharmacy community concerning important pharmacy topics, the Maryland Department of Health (MDH), **Maryland Medicaid Pharmacy Program (MMPP)** has developed the **Maryland Medicaid Pharmacy Program Advisory**.

To expedite information timely to the pharmacy and prescriber communities, an email network has been established which incorporates the email lists of the Maryland Pharmacists Association, EPIC, CARE, Long Term Care Consultants, headquarters of all chain drugstores and prescriber associations and organizations.

It is our hope that the information is disseminated to all interested parties. If you have not received this email through any of the previously noted parties or via MDH, please contact the MMPP representative at 410-767-1455.